

APOLLO HOSPITALS, SECUNDERABAD

AAC - 12

Issue: C

Date: 06-01-2017

POLICY ON DISCHARGE OF PATIENTS

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PREPARED BY:

APPROVED BY:

Dy.Medical Superintendent

Chief Executive Officer

1.0 Purpose:

To provide guidelines for the discharge of in-patients from Apollo Hospitals, Secunderabad.

2.0 Policy:

2.1 All patients leaving the organization are provided with Discharge summary including patients leaving against medical advice.

Discharge procedures shall be followed to ensure patients are discharged effectively and efficiently, allowing for optimal utilization of available resources. The discharge shall be planned at the time of admission.

- 2.2 An authorized hospital discharge shall only be made by an authorized, written order wherein a consultant advises discharge on satisfaction with the patient's condition. Discharge information shall be given to the registrar/resident/staff nurse/ward secretary. Discharge summary shall be prepared by the resident and approved by the consultant. However, a patient shall also have the right to obtain discharge against Medical advice.
- 2.3 The physician shall be required to document discharge instructions in the patient's medical record at the time of anticipated discharge. The final Discharge Summary



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should be signed by the Consultant and the resident, before handing it over to the patient. In any situation the discharge summary will not be dispatch without the treating consultant signature.

- **2.4** The In charge Doctor shall be the responsible person to ensure compliance with this policy.
- 2.5 In case of patients being in hurry, prescription written by the Consultant /Registrar/ Resident shall be made available immediately and the discharge summary signed by the Consultant shall be sent to the patient by post. A copy of the discharge summary shall also be filed in the patients' medical record.
- **2.6.1** The Discharge summary shall include- the reasons for admission, significant findings, diagnosis and patient's condition at discharge.
- **2.6.2** It shall also include the investigation results, important laboratory results, the medications given and the procedure performed (if any).
- **2.7** It shall include the follow up advice, medications and other instructions and how to obtain urgent care in an understandable manner.
- **2.8** In case of death the same shall include the cause of death.



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3.0 Discharge of patients:

There are three types of Discharge:

Discharge on advice

Discharge on request

Discharge against Medical Advice (DAMA)

Medico Legal Cases (MLC)

Absconding cases

3.1 Discharge on advice:

- The consultant shall advise discharge on satisfaction with the patient's condition. Discharge information shall be give to the resident / registrar / staff nurse/ ward secretary. Discharge summary shall be prepared by the resident in writing and approved by the consultant with signature. Consultants shall sign all discharge summaries / discharge briefs / death summaries, stating the date.
- The discharge medications shall be checked by the prescription audit team.
- All discharge summaries / discharge briefs / death summaries, after being checked and signed by the treating consultant and shall be handed over to the patient or next of kin, where applicable.



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- The nurse shall be responsible for completing the discharge checklist. The
 Registrar/ Resident doctor shall explain the discharge summary and
 discharge medication to the patient. Patient / family understanding shall be
 documented on the discharge checklist by obtaining the patient/family
 signature.
- A copy of the discharge summary shall also be made available to the physician responsible for the patient's continuing care.
- The floor patient care provider shall be responsible for monitoring that all
 discharge summaries / discharge briefs / death summaries are signed by
 the consultants and complete in all respects.
- The time taken for discharge of cash patients is within 120 minutes and other credit patient is 300 minutes. The floor executive should maintain a data for the same and review in monthly meetings.

3.2 Discharge on request:

In case the patient / attendant / request for discharge while further treatment is advised due to financial / any other reasons, the consultant shall prepare a clinical case summary of the patient. Discharge formalities shall be completed. A copy of



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investigation reports and clinical case summary shall be handed over to the attendants after billing procedure is completed.

3.3 Discharges/Leave Against Medical Advice (DAMA):

The process for patient leaving the hospital on DAMA shall be the same as discharge on advice. However consent from patient is recorded on DAMA form.

3.4 The patient's readiness for discharge shall be determined by his/her treating doctor and when appropriate, includes the family in the discharge planning.